Case 2:07-cv-00/48/4-MEF/1970 / Bocument AH / Filled 05/18/2007 / APage 1 of 2 CUY/2 T

FOR THE MIDDLE DISTRICT OF ACABAMY NORTHERN DISSION

ZETT KAY 18 A 9:57 16 MBy 2007

HENRY JUINER PlAINTIFF, 5

2:07-CV-380-NIFF 3 (WC) 3 2:07-CV-38(-MEF 3 (ωυ)

D.T. MARSHALC, et. AC, DEFENDANT (S)

)2:07-CV-386-WKW (WO)

MOTTON FOR RECONSTIDERATION I, HENRY JOINER, AU-SE, MUTION FOR RECONSIDERTION because, I have NO MONEY, I, because OF Substantial hardship, am unable to pay the docket Fee And Service Fees in this CASE. I request that payment of these fees be WAIVEL, TAXEL AS COST, because I have NU monies. IN Order to get one Process of the LAW And equal Notection of the LAW, UNITED STATES TONSTITUTED AMENDMENTS.

IF my CASE is Dismiss, Frivolous, my life Will be in imminent danger of Serious Physical injury, Relief, Any Retief the Court CAN

PROOF	OF	SERV	tce_
I, HENRY, JO OH 16 MAY OF the M	SiNer, Pro-se	CErTIFY	ThAT
ON 16 may	2017, I did	MAY A'C	upy
OF the M	notion For	RECONSTDE	RATION
to the	OFFENERAL	S), by plac	125 12
Eun, int	he United S	totes post	OFFICE
Bux, to be	mail to t	he fullowin	(AS.
		` ~	ap ³

D.T. MARSHACC, et. AC.,
MONTGomery County SHRETFF DEPARTMENT
250 SOUTH McDonough St.
MONTGomery, ALABAMA2
36104

Pou-se Kenny Jainer

Address of pro-se
Pro-se HERRY Juiner

M.C.O.F.

BOUK NO. #1092

P.O. BOX 4599

MUNTGOMERY HUNGIAM 12

36103

State of Alabama Unified Judicial System

AFFIDAVIT OF SUBSTANTIAL

Case Number 2:07-CV-380 MEF

Form C-10 Page 1 of 2	Rev. 2/95	HARDSHIF	AND ORDER	2:07-CV-386-MEF			
IN THE (Circuit, District, or Municipal) COURT OF MONAGE (Name of County or Municipality)							
	At Albert	2011 3	v. 1. 111111	Little was			
TYPE OF PROCE		Plaintiff(s) CHA	Defe RGE(s) (if applicable):	endant(s)			
E CIVIL CASE-I,	because of subs	tantial hardship, am unable	to pay the docket fee and service costs at the conclusion of the c	ce fees in this case. I request			
CIVIL CASE-(s	uch as paternity		rental rights, dependency) - I a				
☐ CRIMINAL CAS	E- I am financia	ally unable to hire an attorn	ey and request that the court ap unable to hire an attorney and				
one for my child	/me.	AFFIDA	AVIT				
SECTION I.		AFFIDA	AVII				
1. IDENTIFICATION	l .	the state of the s					
Full name	HELLY	110111111	Date o	of birth			
Spouse's full name accomplete home ac	∌ (<i>ii mamed) <u>/</u> ∧</i> ddress //		5 - 5 - 5 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -	NO456 5+.			
141011	(- 1 1 2 3 5 6 3 5 1	and the second of the second of the					
Number of people Home telephone r			· · · · · · · · · · · · · · · · · · ·				
Occupation/Job		Length of empl	oyment N/				
Driver's license nu		•\$o	cial Security Number	98-5944			
Employer/\(\frac{\lambda}{\lambda}\) Employer's addres		Emp	loyer's telephone number <u> </u>	4			
2. ASSISTANCE	BENEFITS						
Do you or anyor apply.)	ie residing in your	household receive benefits for	rom any of the following sources?	(If so, please check those which			
□ AFDC □	Food Stamps	□ SSI □ Medicaid	□Other				
3. INCOME/EXPE	NSE STATEMEN	Т	•				
Spouse's N Other Eami Contribution Unemployn Social Se	oss income fonthly Gross inco inas: Commission	ome <i>(unless a marital offense</i> , s, Bonuses, interest income, ople Living in Household compensation, ts, etc.	etc.				
		MONTHLY GROSS INCOME		<u> </u>			
Total U Food Clothin Health Insurar Car Pa	Expenses lortgage Itilities: <i>Gas, Eleci</i> g Care/Medical		\$ <u>\$</u>				

Form C-10 Pa	ge 2 of 2 Rev. 2/95	AFFIDAVIT OF	SUBSTA	NTIAL HARDS	SHIP AND ORDER
Mont	hly Expenses: (cont'd p Credit Card Payment Educational/Employm Other Expenses (be s	age 1) (s) ent Expenses	-) A	
	Sub-To	ial	•		As O
В.	Child Support Paymer	at(s)/Alimony	\$		A 9
	Sub-To	•			B S
C.	Exceptional Expenses		\$	S.	- V
	TOTAL MON	THLY EXPENSES (add subtot	als from	A & B monthly	only) \$
Total	Gross Monthly Incom	e Less total monthly expenses:			
	0	ISPOSABLE MONTHLY INCO	ME		S
Cash bond Equit Equit motor guns, Other Do yo	<i>is, certificates of depos</i> y in Real Estate (value y in Personal Property.	of property less what you owe) etc. (such as the value of furnishing, jewelry, tools, value? □ Yes □ No	\$		
	TOTAL	LIQUID ASSETS		- .	s
obtain rec understan the fees a	r affirm that the answer estion in the affidavit ma ords of information perta d and acknowledge that and expenses of my countries and subscribed before day of	ning to my financial status from any if the court appoints an attorney turt-appointed counsel.	source in corepreser	unorize the court	d that a false statement or answer or its authorized representative to rmation provided by me. I further ay require me to pay all or part of
		ORDER OF CO			
☐ Affiant \$ ordered ☐ Affiant ☐ The pre IT IS FURT affiant. IT IS FURT expenses.	is partially indigent and toward the an toward the an and disbursed as follow is indigent and request apayment of docket feet THER ORDERED AND Approved by the court	AND ADJUDGED BY THE COUR est is DENIED, able to contribute monetarily towal ticipated cost of appointed counsel. st	T AS FOL rd his/her Said armou	defense; therefore nt is to be paid to	ppointed as counsel to represent
· -			Judge		